

# FEE(S) TRANSMITTAL

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## CURRENT CORRESPONDENCE ADDRESS

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Brent Yonehara

(Signature)

June 19, 2007

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTY'S DOCKET NO.	CONFIRMATION NO.
08/873,597	06/12/1997	JON FAIZ KAYYEM	067456-5005US	2066

**TITLE OF INVENTION:** AC/DC VOLTAGE APPARATUS FOR DETECTION OF NUCLEIC ACIDS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	06/19/2007

EXAMINER	Art Unit	CLASS-SUB CLASS
FORMAN, BETTY J	1634	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Morgan Lewis & Bockius LLP**

2. **Robin M. Silva**

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:  
**Clinical Micro Sensors, Inc.**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)  
 Pasadena, California

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ Individual ☒ corporation or other private group entity ☐ government

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☒ Issue Fee

☐ Publication Fee

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(Authorized Signature)

(Date)

TAO HUANG, REG. NO. 60,006 FOR  
 ROBIN M. SILVA, REG. NO. 38,304

June 19, 2007

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